



Allied Health • Audiology and Hearing Aids

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Special Update

Medi-Cal Transitions to CMS-1500 Form and NPI

This bulletin contains provider manual updates based on Medi-Cal's acceptance of the new *CMS-1500* form and advancement to the use of the National Provider Identifier (NPI).

From April 23, 2007 to June 24, 2007, Medi-Cal will accept both the *HCFA 1500* and *CMS-1500* form. During this transition period, providers are encouraged to migrate their business processes away from the *HCFA 1500*, depleting their form stock, in preparation for exclusive use of the *CMS-1500*.

Providers may continue to use the *HCFA 1500* form during the transition period and bill as they do currently. Providers using the *HCFA 1500*, however, can only enter their Medi-Cal provider number.

Providers may choose to fully transition to the new *CMS-1500* claim form at any time during this two-month period before the use of the *CMS-1500* becomes mandatory. Beginning June 25, 2007, Medi-Cal will only accept the *CMS-1500*.

Also, beginning May 23, 2007, the NPI, if available, should be reported along with the Medi-Cal provider number, but is not necessary for proper adjudication. The Medi-Cal provider number must be reported on all claims through November 25, 2007. Claims received with only an NPI will not be processed.

Beginning November 26, 2007, providers must use only an NPI when submitting *CMS-1500* claims to Medi-Cal.

***** Special inserts explaining how to enter provider identifiers during the dual-use period are included with this mailing. Please place them in your provider manual, according to the instructions on the Remove and Replace page, to help with billing during this period.***

Instructions for Manual Replacement Pages

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Part 1 Provider Manual

Remove and replace
at the end of *Manual*
Ordering section:

Subscriber Order Form 1/2

Remove and replace: claim sub 1 thru 4
cmc enroll 5/6
elect 1/2
mcp spec 7/8

Remove: medicare 11 thru 15
Insert: medicare 11 thru 13

Remove and replace: other 5/6
point 1/2
Medi-Cal Point of Service
(POS) Network/Internet
Agreement 1/2
prog 1/2, 5/6
prov rel 5/6

Remove and replace: forms leg 3/4
genetic 3 thru 8

Remove: hcfa comp 1 thru 24
HIPAA In Review
Code Correlation Guide
hcfa spec 1 thru 9
hcfa sub 1 thru 6
hcfa tips 1 thru 4

Remove and replace: hcpcs 1/2
hear aid ex 1 thru 3

Remove: medi cr hcfa 1 thru 20
Replace with: *NPI dual-use insert*
medi cr cms 1 thru 20 (*new*)

Remove: medi cr hcf exa 1 thru 3
Insert: medi cr cms exa 1 thru 3 (*new*)

Remove: medi cr hcf pra 1 thru 9
Insert: medi cr cms pra 1 thru 9 (*new*)

Remove and replace: medi non hcp 1 thru 3
remit pay 1/2

Remove: share hcfa 1 thru 6
Insert: share cms 1 thru 5 (*new*)

Remove: speech exh 1 thru 3
Insert: speech exc 1 thru 3 (*new*)

Part 2 Provider Manual

Insert at front
of manual: *NPI dual-use insert*

Remove and replace: *Contents for Audiology and*
Hearing Aids Billing and Policy
i thru iv
audio 5/6, 9/10

Remove: audio exh 1 thru 3
Insert: audio exc 1 thru 3 (*new*)

Remove and replace: cal child bil 1/2
CCS Program Billing
Guidelines 1/2

Remove: cal child bil hcf 1 thru 3
Insert: cal child bil cms 1 thru 3 (*new*)

Remove and replace: cal child panel 1 thru 4
cal child sar 1 thru 6
children 1/2

Insert after the
CIF Submission
and Timeliness
Instructions section: *NPI dual-use insert*
cms comp 1 thru 23 (*new*)
cms spec 1 thru 8 (*new*)
cms sub 1 thru 6 (*new*)
cms tips 1 thru 4 (*new*)